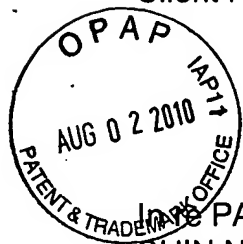


Attorney's Docket: 051270-0304519  
Client Reference: H7952US



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re PATENT APPLICATION of:  
SHIN NISHIZAWA

Confirmation Number: 5585

Application No.: 10/607,338

Group Art Unit: 2621

Filed: June 26, 2003

Examiner: ZHAO, DAQUAN

For: **METHOD OF CONTROLLING THE OPERATION OF AN OPTICAL DISC  
RECORDING APPARATUS, AND RECORDING MEDIUM ON WHICH THE  
CONTROL PROGRAM IS RECORDED**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**AMENDMENT/RESPONSE TRANSMITTAL**

Transmitted herewith is an amendment/response for this application.

**EXTENSION OF TIME**

The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant petitions for a three months extension of time under 37 C.F.R. 1.136.

**FEES**

The fee for claims and extension of time (37 C.F.R. 1.16 and 1.17) has been calculated as shown below:

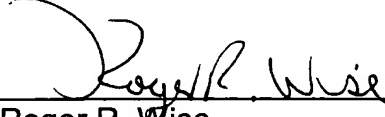
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDIT. FEE
TOTAL	17	- 20 or HP	= 0	x	\$ 52.00	= \$ 0.00
INDEP.	5	- 3 or HP	= 0	x	\$ 220.00	= \$ 0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+	\$ 390.00	= \$ 0.00
TOTAL ADDITIONAL CLAIM FEE						\$ 0.00
EXTENSION OF TIME FEE						\$ 1,110.00
GRAND TOTAL						\$ 1,110.00

Attorney's Docket: 051270-0304519  
Client Reference: H7952US

**FEE PAYMENT**

Authorization is hereby made to charge the amount of \$1,110.00 to Deposit Account No. 033975. Charge any additional fees required by this paper or credit any overpayment in the manner authorized above. A duplicate of this paper is attached.

Date: July 29, 2010  
PILLSBURY WINTHROP SHAW  
PITTMAN LLP  
725 South Figueroa Street  
Los Angeles, CA 90017-5406  
Telephone: (213) 488-7100  
Facsimile: (213) 629-1033  
Customer No. 27496

  
Roger R. Wise  
Registration No. 31204

---

**CERTIFICATION UNDER 37 C.F.R. §§ 1.8 and/or 1.10\***

(When using Express Mail, the Express Mail label number is **mandatory**; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

  
**Signature**

Date: July 29, 2010

Roger R. Wise  
(type or print name of person certifying)

*\* Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.*

Attorney's Docket: 051270-0304519  
Client Reference: H7952US



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re: PATENT APPLICATION of:  
SHIN NISHIZAWA

Confirmation Number: 5585

Application No.: 10/607,338

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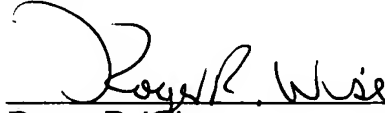
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TOTAL	17	- 20 or HP	= 0	x \$ 52.00	= \$ 0.00
INDEP.	5	- 3 or HP	= 0	x \$ 220.00	= \$ 0.00
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			+	\$ 390.00	= \$ 0.00
TOTAL ADDITIONAL CLAIM FEE					\$ 0.00
EXTENSION OF TIME FEE					\$ 1,110.00
GRAND TOTAL					\$ 1,110.00

Attorney's Docket: 051270-0304519  
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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2009

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$1,110.00)

### Complete If Known

Application Number 10/607,338  
Filing Date June 26, 2003  
First Named Inventor SHIN NISHIZAWA  
Examiner Name ZHAO, DAQUAN  
Art Unit 2621  
Attorney Docket No. 051270-0304519

### METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number: 033975 Deposit Account Name: Pillsbury Winthrop Shaw Pittman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee  
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

### FEE CALCULATION

#### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

#### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195
<b>Total Claims</b>	<b>Fee (\$)</b>	<b>Multiple Dependent Claims Fee (\$)</b>
17 - 20 or HP = 0 x 0 = 0	0	0
HP = highest number of total claims paid for, if greater than 20		
<b>Indep. Claims</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
5 - 3 or HP = 0 x 0 = 0	0	0
HP = highest number of independent claims paid for, if greater than 3		

#### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)

- 100 = /50= (round up to a whole number) x = Fee Paid (\$)

#### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 3-Month Extension of Time

1,110.00

#### SUBMITTED BY

Signature

Registration No. 31204

Telephone 213.488.7584

Name (Print/Type) Roger R. Wise

(Attorney/Agent)

Date July 29, 2010

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

AmericanLegalNet, Inc.  
www.FormsWorkflow.com



<b>FEE TRANSMITTAL</b> <b>For FY 2009</b>		<b>Complete If Known</b>		
		Application Number	10/607,338	
		Filing Date	June 26, 2003	
		First Named Inventor	SHIN NISHIZAWA	
		Examiner Name	ZHAO, DAQUAN	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2621	
<b>TOTAL AMOUNT OF PAYMENT</b>		<b>(S)1,110.00</b>	<b>Attorney Docket No.</b>	<b>051270-0304519</b>

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☒ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 033975 Deposit Account Name: Pillsbury Winthrop Shaw Pittman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
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**2. EXCESS CLAIM FEES**

Fee Description	Small Entity	
	Fee (\$)	Fee (\$)
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Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

**Total Claims** 17 - 20 or HP = 0 **Extra Claims** 0 **Fee (\$)** 0 **Fees Paid (\$)** 0

HP = highest number of total claims paid for, if greater than 20

**Indep. Claims** 5 - 3 or HP = 0 **Extra Claims** 0 **Fee (\$)** 0 **Fees Paid (\$)** 0

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Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
<u>17</u> - 100 = <u>0</u>	<u>0</u> / 50 = <u>0</u>	(round up to a whole number) x <u>0</u>	<u>0</u>	<u>0</u>

**4. OTHER FEE(S)**

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): <u>3-Month Extension of Time</u>	<u>1,110.00</u>

<b>SUBMITTED BY</b>		
Signature	<u>Roger R. Wise</u>	Registration No. 31204 (Attorney/Agent)
Name (Print/Type)	<u>Roger R. Wise</u>	Telephone 213.488.7584
		Date <u>July 29, 2010</u>

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